

Legislative Testimony
H.B. 5630 AAC The Establishment Of Licensure For An Advanced
Practice Dental Hygiene Practitioner
Public Health Committee
Monday, March 16, 2009
Dr. Beth Bureau

My name is Dr. Beth Bureau. I am a general dentist working in the New Haven area. I have been practicing dentistry for almost four years. Before attending dental school, I practiced as a dental hygienist for five years. Due to my past experiences as a hygienist, I have a unique perspective on HB5630.

I graduated from the University of New Haven in 1996, with an Associate's degree in Dental Hygiene. Over the next year and a half I worked as a dental hygienist and continued my education, graduating in 1998 with a bachelors of science in dental Hygiene. Since I enjoyed working in the dental field, I wanted to continue my education, allowing me to provide the highest quality of care to my patients. I spent the next three years working full time and taking prerequisite classes for dental school. In August of 2001, I started dental school at New York University. Our rigorous course load included histology, biochemistry, gross anatomy, oral pathology, pharmacology, oral surgery, four years or clinical labs, and the list goes on.

I graduated from NYU in 2005 with high honors and started working in a private practice thinking that my four years of dental school had prepared me for the uncertainty that would lie ahead. However, just a few weeks into my new career, I realized that I still had numerous questions and varying degrees of uncertainty in some situations. Luckily, I work in a successful group practice with experienced doctors, who were willing to mentor me through these trying encounters.

My point is, if I had questions after practicing for five years as a dental hygienist, graduating with honors from dental school and receiving high scores on my national board examinations, what kind of questions will these dental hygienists have? Many patients present with complicated medical histories and extensive treatment plans. How will these hygienist handle these situations without an extensive medical background? What will happen when a situation arises during treatment that was not anticipated?

I agree that we must find a way to increase access of care for the under-served, but to solve this dilemma by substituting a well trained dental surgeon for a lesser trained dental professional is unacceptable.

Respectfully Submitted,

Dr. Beth Bureau